

APNO Monthly Newsletter

May 2011



Monthly Meeting Notice

DATE: Tuesday May 10, 2011

TIME: 6:00-6:30 Social Networking
6:30-7:00 Business Meeting
7:00-- Presentation

TOPIC: Obesity Surgery Update

SPEAKER: Wendy Murray RN FNP
St. John's Specialty Surgery

WHERE: Touch Restaurant
1620 E. Republic Road

RSVP: email wendy.murray@mercy.net or
call 209-6313 (cell) by May 6, 2011

Sponsor: Allergan/Tricia Engel

APNO President's Corner

Happy May APNO! Spring is in full effect and hopefully all of the torrential rain is done!! On April 28th we submitted our application to MONA to become an Approved Provider for CEU's. We should hear back from them in the next several weeks to see if our application has been approved. Once we have approval we will start scheduling the quarterly education session and booking speakers. We want to use APNO members as speakers so if you have a canned presentation and are interested in speaking let me know!!

President's Corner (continued)

The executive board recently met for our quarterly meeting. One of the big topics of discussion was the MONA application. We also discussed changing the password to the member only sections of the website on an annual basis. Once you renew you will get a confirmation email with the receipt of renewal and the updated password. An email recently went out to all current members with this year's new password.

Scholarship applications have also been recently sent out, for all of our student members, please apply!! The scholarship committee has already received one applicant, so again students please apply and preceptors please pass this information on to your students!!

I am not going to end this month's column by asking for involvement or encouraging political participation. I am going to ask that everyone please keep Ashley Kubik in their prayers. Ashley is a nurse practitioner specializing in sleep medicine and a long time APNO member. She was one of our speakers at last year's conference and recently wrote a column for the APNO newsletter on her experience at St. Jude's with her son. She recently gave birth to her third child and developed post-partum complications. She has been transferred to Barnes for additional treatment. At last report she was responding well to treatment. I had the privilege of working with Ashley early in my career when I was hired as a unit tech in the MICU while I was in nursing school and she was working on her masters. She was the first advanced practice nurse that I worked with as a nurse and seeing what she did and how she collaborated with her physician is one reason why I am also an advanced practice nurse. She has inspired and touched the lives of many, so I ask to please keep Ashley and her family in your thoughts and prayers.

APN's Honored

Congratulations to area NP's Debbie Essary, Katrina Stevens, and Doug Downs as they were recently honored in the third annual Southwest Missouri Salute to Nurses sponsored by the News-Leader. The event was held on April 26, 2011 with a luncheon attended by more than 250 people. Debbie was honored as the "Nurse of the Year". Katrina was awarded the "Lifetime of Compassion" award. Doug Downs received the "Community Outreach" award for his work with the Amish in his Seymour clinic (featured in a previous issue of the APNO newsletter). They were selected from 290 finalists.

You can read the entire story here:

<http://www.news-leader.com/article/20110427/NEWS01/104270375/Winner-humbled-by-nursing-award?odyssey=mod|newswell|text|FRONTPAGE|p>

Your APNO Board

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Job Opportunities

We are currently recruiting for a Family Nurse Practitioner to work in our Rural Health Clinic.

Valerie Arambasick Johnson
Human Resource Director
Sullivan County Memorial Hospital
Milan Missouri 63556
scmhval@nemr.net

Full time FNP position in Forsyth MO. Contact
Rachelle Bridges, MD for more information.
417-251-2768. Fax CV to 417-546-4505.

Need to improve your business knowledge related to your practice? Go to the web and check out the following journal for NPs. Currently this is the only business journal for NPs written **for NPs by NPs**.

Practice Management, A Business Guide for Nurse Practitioners

<http://www.nppracticemgt.com/>

Secretary's Report

Happy Spring to Everyone! I hope you all had a great Easter. The scholarship committee had their first meeting last week. We were able to finalize the paperwork and sent out the scholarship guidelines and applications to all Master's of Nursing Programs in Missouri. All of the scholarship information is also online on the APNO website. Don't hesitate to email me for any questions regarding scholarships at shannadewater@yahoo.com We encourage all of our students to apply. Deadline is to have everything received by July 30, 2011. We will hand out the scholarships at the Fall APNO convention.

I want to encourage everyone to become more politically involved. It is an exciting time to be a Nurse Practitioner in the state of Missouri. I have a meeting set up between the State Board of Nursing and MONA the first week of May. We are hoping to set up an interdisciplinary committee between the Board of Healing Arts, Board of Nursing, and Board of Pharmacy. The committee will work on barriers for patient access. This will definitely cover APRNs practice in the state of Missouri. We are all aware that if we have decreased practice barriers then it will increase patient access and over all Missourian's healthcare. I am working with Kyna, MONA lobbyist, to hopefully introduce language on a board of healing arts bill in January, 2012 to remove the 30/50 mile barrier. As more and more legislation is introduced, I would like to encourage all of you to become active with telephone calls and emails. The response to the last House Bill was amazing. We defeated it because of our voices.

I want to leave you all with some statistics to think about over the next few months. Did you know that only 10% of new physician graduates in the state of Missouri go into Family Practice? The total number of physician students nationwide has started to decline. Every single county in the state of Missouri, all 114, are considered healthcare shortage areas. Missouri currently has 5,867 licensed APRNs. Nurse Practitioners work in all 114 counties in the state of Missouri.

Networking Update

Hellooooo APNO Members.

It has been a busy at the State and Local levels regarding legislative issues. The general belief, going into the current session, was that things would be relatively quiet in Jefferson City. No such luck. Kyna Iman and Jill Kliethermes have been quite busy on several different concerning issues that have recently come about.

Many thanks to you that responded to my announcements regarding SB 303 and HB 732. These bits of legislation focused on the limitations of the use of the title "Doctor" to only physicians. This sounds initially like a small thing. However, some wording would have made the use of the title (by anyone other than a physician in a hospital setting) a felony. This would have affected anyone that was doctoral prepared such as nurses, psychologist, dentist, optometrist, pharmacist ...and the list could go on. However, with response to the issue from APNO members and other members around the state, as well as other professional stakeholders that would have been impacted, the wording was removed from the bills.

However, it is believed that the language will return attached to other bills that are going through this session. We will have to be vigilant. We need to offer many thanks to the Missouri Nurses Association and Kyna Iman for bring such matters to our attention. Without their insight and ability to stay current with current legislation proposals, Missouri APRNs have the potential to suffer more barriers to practice and in turn further restricting our ability to care for our patients.

Institute of Medicine and the Future of Nursing

With more than 3 million members, the nursing profession is the largest segment of the nation's health care workforce. Working on the front lines of patient care, nurses can play a vital role in helping realize the objectives set forth in the 2010 Affordable Care Act, legislation that represents the broadest health care overhaul since the 1965 creation of the Medicare and Medicaid programs. A number of barriers prevent nurses from being able to respond effectively to rapidly changing health care settings and an evolving health care system. These barriers need to be overcome to ensure that nurses are well-positioned to lead change and advance health.

In 2008, The Robert Wood Johnson Foundation (RWJF) and the IOM launched a two-year initiative to respond to the need to assess and transform the nursing profession. The IOM appointed the Committee on the RWJF Initiative on the Future of Nursing, at the IOM, with the purpose of producing a report that would make recommendations for an action-oriented blueprint for the future of nursing. Through its deliberations, the committee developed four key messages:

- Nurses should practice to the full extent of their education and training.
- Nurses should achieve higher levels of education and training through an improved education system that promotes seamless academic progression.
- Nurses should be full partners, with physicians and other health care professionals, in redesigning health care in the United States.
- Effective workforce planning and policy making require better data collection and information infrastructure.

The United States has the opportunity to transform its health care system, and nurses can and should play a fundamental role in this transformation. However, the power to improve the current regulatory, business, and organizational conditions does not rest solely with nurses; government, businesses, health care organizations, professional associations, and the insurance industry all must play a role. Working together, these many diverse parties can help ensure that the health care system provides seamless, affordable, quality care that is accessible to all and leads to improved health outcomes.

The following URL will take you to this site so that you may either view the Brief (PDF) or the full report recommendations.

<http://www.iom.edu/Reports/2010/The-Future-of-Nursing-Leading-Change-Advancing-Health.aspx>

Get to know your elected official

Now is a good time to begin developing your relationship with your Missouri elected representatives. Please take time to go to http://www.senate.mo.gov/lookup/leg_lookup.aspx and plug in your full zip code. Once this is completed you will be provided with a full listing of State and Federal legislative representatives for your area. These are the key players that we need to get to know and the issues that are important to them. Send them notes of support for issues that you agree with. If we take the time to support them in their causes, they will be more likely to be familiar with us as individuals as well as APRNs as a profession and support us later in our need.

SB 724 Controlled Substances

The expectation is that the paper work to move forward with the promulgation of SB 724 will be moving forward as early as September 2011. This is an un-official notification to a time-line and is not to be confused with the approval to go ahead and seek DEA numbers. Once the rules have been finalized and promulgated. Official word will be provided by the Missouri State Board of Nursing regarding methods to proceed.

News from the American Academy of Nurse Practitioners

Three BIG State-level Policy Wins for NPs

NPs in Georgia, Iowa, and North Dakota are all celebrating legislative victories for updating and modernizing state statutes regulating NP practice and patient care.

GEORGIA: HB 303 passed last week and is on its way to the Governor for a signature. This legislation will streamline care by recognizing NP signatures on all forms related to their scope of practice with the exception of death certificates and assigning a percentage of disability for Workman's Compensation. It also loosens some impractically restrictive requirements for documenting office samples.

IOWA: Two bills in Iowa have been signed into law by Governor Branstad. SF 393 passed unanimously to authorize NPs to sign death certificates and SF 149 also passed requiring the Department of Transportation to accept a nurse practitioner's assessment determining a person's competency to operate a motor vehicle. NPs in Iowa overcame strong opposition from the medical community this session by working together and gaining overwhelming legislative support for these two patient care areas.

NORTH DAKOTA: SB 2148 has been signed into law granting NPs full plenary (autonomous) practice!! Once rules are adopted by the Board of Nursing, North Dakota no longer requires a collaborative physician for NP prescriptive privileges. This update paves the way for the more effective and efficient utilization of NPs in the entire state.

AANP celebrates with you, and is proud to have been part of the victories in these states. The campaigns were successful because individual NPs joined the campaign by writing emails, making calls, and attending hearings. However, we still have numerous active sessions and multiple bills in play. AANP is partnering with local NP leaders to move state legislative efforts forward. Please check the AANP advocacy center and your local AANP groups to learn of activities in your state.

For the AANP Advocacy Center go to:

<http://www.capwiz.com/aanp/home/>

From the Notes of Kyna Iman, MONA Lobbyist (It has been a busy Spring 2011)

The following is a briefing of “some” of the happenings at the state level that would likely affect you. For a complete and up to date listing for Bill Status Reports please visit <http://www.missourinurses.org/displaycommon.cfm?an=1&subarticlenbr=76>

NURSING EDUCATION INCENTIVE PROGRAM – HB223 & SB191

The Senate Education Committee heard Senate Bill 191, sponsored by Senator David Pearce. There was no vote on the bill. The House version of the “Nursing Education Incentive Program”, House Bill 223, sponsored by Rep. Wayne Wallingford, R-Cape Girardeau, passed through Rules committee and is number 10 on the House Calendar for debate.

The Program would be funded from nursing license fees that are in the State Board of Nursing’s fund. An eligible nursing program is one at an institution of higher education accredited by the higher learning association of the north central association. No one school may receive more than one annual grant in the amount of \$150,000.

MO HEALTHNET OVERSIGHT COMMITTEE – HB272

House Bill 272, sponsored by Rep. Jeanne Kirkton, D-Webster Groves, places a registered nurse, licensed under Chapter 335, who participates in Medicaid, on the MO HealthNet Oversight Committee. House Bill 272, was passed by the House with a vote of 153 to zero. The bill now goes to the Senate.

WORKPLACE VIOLENCE LEGISLATION – HB652

Rep. Jeanie Riddle, R-Fulton, is the sponsor of our legislation to expand the crime of assault of a law enforcement officer, corrections officer, emergency personnel, highway worker in a construction or work zone, or probation and parole officer to include a health care worker. The legislation had a hearing in the House Committee on Crime Prevention. Jill Kleithermes, Jeff Tucker, and Kristen Bringer all testified on behalf of nurses, Daniel Landon testified on behalf of the Missouri Hospital Association and Jeffrey Howell testified on behalf of the Missouri State Medical Association, and Betsy Ledgerwood testified on behalf of the Emergency Room Physicians. There was no vote taken on the bill.

PROMPT CREDENTIALING ACT – HB347

Rep. Jeanne Kirkton, D-Webster Groves, introduced House Bill 347. HB347 Establishes the Prompt Credentialing Act which requires a health carrier to credential a health care professional within 60 days of receiving a completed application. The hearing in House Professional Registration went great; however, the Chairman is waiting for some language from the lobbyists for the insurance lobby, before voting on it in Committee. Chairman Brandom has informed supporters of the legislation that she will bring it the legislation to a vote, and not let the opponents continue to postpone the vote.

TITLES AND BADGES – SB303, and HB732, and HB287

This session has already had numerous discussions on various titles that can be used for health care providers. MONA constantly watches, offers amendments, and/or defeats language that would state new requirements for titles in hospitals and clinics.

In Senate Bill 303, we were successful in getting the sponsor, Senator Kevin Engler, R-Farmington, to remove language from his physician disciplinary legislation that would confuse statute on who the Board of Healing Arts could discipline. And after numerous contacts, Senator Engler agreed to remove language in the bill that would allow only a physician to be referred to as “doctor” in a hospital setting.

The House version, HB732, came up for a vote this week. Chairman Brandom and Rep. Keith Frederick tried to amend language on to HB732 that would require a nurse with a DNP or PhD in nursing to introduce themselves in a hospital, clinic, or ambulatory center as “doctor”

followed by his or her name, and then state the licensure held such as nurse anesthetist or nurse practitioner. We were able to get the committee to defeat the amendment by a vote of 6-14!! Thank you to all who made calls and contacts to members of the House Professional Registration Committee.

In House Bill 287, the Chairman of the House Professional Registration Committee, passed legislation that went through numerous versions. HB287 would require health care professional identification badges to include the employee's name, title, recent photograph, and the name of the health care facility or organization. The original version just required "Physician" or "Nurse" on the name badges. The House Committee Substitute now reads: "Any nurse as defined in section 335.016 may have the title "Advanced Practice Registered Nurse", "Certified Nurse Midwife", "Certified Nurse Practitioner", "Certified Registered Nurse Anesthetist", "Licensed Practical Nurse", "Registered Nurse", or "Clinical Nurse Specialist" as applicable for such nurse's level of nursing, licensure, and certification;" This legislation is on the House Consent Calendar awaiting further debate.

PROFESSIONAL LICENSING LEGISLATION – HB265

House Bill 265, sponsored by Rep. Jason Smith, R-Salem, originally only applied to the Board of Nursing. This substitute requires any board, commission, committee, council, or office in the Division of Professional Registration within the Department of Insurance, Financial Institutions and Professional Registration to notify any known current employer of a change in a licensee's license or discipline status. An employer may provide any board, commission, committee, council, or office in the division with a current list of licensed employees and request in writing to the board, commission, committee, council, or office to be notified regarding any change in the licensure status of any employee. The State Board of Nursing is working on new technology to expedite the sharing of information between employers and the BON. MONA testified for informational purposes only, citing the bill should be expanded to include all professionals licensed with the State. The substitute does that and was passed out of committee. The bill is scheduled for a hearing in House Rules Committee on Monday, March 29, at 1:30 p.m.

New Medicare Rules for NPs on E-Prescribing

CMS is starting a new phase of the Medicare Improvements for Patients and Providers Act of 2008 (MIPPA) to increase electronic prescribing (e-prescribing). Nurse practitioners who don't either e-prescribe or properly document e-prescriptions can be penalized with Medicare fee cuts in 2012. To avoid pay cuts, NPs who are enrolled as Medicare providers and directly bill Medicare Part B for at least 100 visits between January and June 2011 must show on Part B claims that e-prescribing was used at least 10 different times.

Those without prescriptive authority or those in areas with restricted access to e-prescribing must document their exemption on Part B claims or face the same penalties.

Missouri Nurses Association APRN Handbook

The APRN Handbook is a manual for Advanced Practice Nurses in Missouri. The handbook is very informational and includes information on state laws and regulations governing APRN practice in Missouri along with information on reimbursement issues. It is the APRNs resource book for APRN practice. All you need to know at your fingertip!

<http://www.missourinurses.org/displaycommon.cfm?an=1&subarticlenbr=126>

Annotated Guide to Missouri Nursing Laws and Regulations

The Annotated Guide to Missouri Nursing Laws and Regulations is a resource every nurse should have! The guide contains explanations of the Nursing Practice Act, Collaborative Practice Law, Missouri State Board of Nursing Rules and Position Statements, and other nursing related laws and rules with interpretations to facilitate understanding.

<http://www.missourinurses.org/displaycommon.cfm?an=1&subarticlenbr=127>

Member Spotlight

HOLISTIC NURSING CERTIFICATION – What, where, how, and why?

By Anita Evangelista, FNP-BC, AHN-BC

I came into nursing in the 1990s after several decades of experience using alternative health practices, including hypnosis, herbal remedies, homeopathics, energy modalities, reflexology, and home birth. It was a natural transition for me to seek holism as a nursing paradigm, as well.

Holism is the view that the “whole person” is involved in health, disease, and the treatment process. The physician, nurse, or other practitioner is not considered a healer who *causes* health changes by use of medicinals or treatments, but is visualized as a *facilitator toward health*. This subtle difference between the allopathic (standard medical) and the holistic conception of health and disease undergirds the entire practice of alternative and complementary health care.

Holistic nurses tend to see ourselves **less** as “tools” through which standard treatment protocols are applied, and **more** as “channels” through which the ill person can find the healing they are willing to accept. As a channel, we utilize healing modalities that work *for the person* – some people strongly desire and believe in conventional medicine; others place the power of their conviction in other approaches. Holism implies meeting the person *where they are*, and working toward the health goals *they desire*. As such, the holistic nurse utilizes much more than standard protocols – including tone of voice, attention, attitude, touch, compassion, empathy, and presence – to “be with the patient”...even when just sitting together quietly. In addition, holism implies self-care and the willingness to use holistic principles in one’s own life, too. These holistic skills are partly innate, and partly learnable.

The American Holistic Nurses Association (<http://www.ahna.org/>) was founded in 1981 to support holism in nursing. It currently offers certification for nurses interested in pursuing the holism paradigm. Advanced practice nurses may apply for the AHN-BC certification (Advanced Holistic Nurse-Board Certified) through the American Holistic Nurses Certification Corporation. There are other certification levels for bachelor-prepared and registered nurses.

Similar to testing for other nursing specialties, the AHN test consists of a paper/pencil quantitative exam, taken at approved testing centers. In addition, there is a “self-reflection” component to the application process that permits the applicant to explore their own

background and orientation toward holism. At the time I received certification, there was a 50+ hour CE course in book form that provided the educational background for the test. Today, there is a large, detailed handbook that is used in holistic nursing specialty programs at several Universities*. Potential applicants for certification do not need to have completed the specialty program – they may instead provide verification of their prior holistic practice within nursing over the previous five years. Keep in mind that even though holism is perceived to be a “soft” discipline, the test itself is thorough, comprehensive, and as difficult to master as testing in any other nursing specialty!

I believe that the future of nursing – and ultimately of all medical practice – is in the holistic paradigm. Each passing year demonstrates the utility of holism, and the futility of allopathy’s view of the person as a collection of separate non-interactive parts. Even so, holding the AHC-BC certification has made no difference in my income level or employability in this region.

Using those initials after my name, however, has provided numerous opportunities to explain holism and alternative modalities to both patients and providers. At that point, the door is open to deeper and more revealing conversation – and the process of *meeting the person where they are*, whether patient or colleague, has begun.

*Dossey, B., Keegan, L., Guzzetta, C., and Kolkmeier, L. (2005). *Holistic Nursing: A Handbook for Practice* (5th edition). Gaithersburg, MD: Aspen Publishers.